

Minutes

State Medevac Committee

January 12, 2006

Called to order at 10:03

Adjourned at 12:00

Location: The Place at Innsbrook

Meeting called by:
Randy Abernathy

Chair: Randy Abernathy

OEMS Staff: Paul Sharpe, Christy Saldana, Jodi Kuhn.

Attendees: Anita Ashby, Bob Knox, Brian Solada, Chris Perkins, Chris Stevenson, Chris Thomson, Earl Carter, Darryl Lazar, David Bump, David Murray, David Trueman, Don Childs, Don Savage, Earl Carter, Greg Jones, Jason Hefner, Jay Cullen, Jeff Doucette, John Bianco, John Ratliff, Kathy Colantuono, Kay Eliason, Linda Sayles, Michael Ortega, Susan Smith, Nick Saunders, Paul Davenport, Purvis Dawson, Robin Davis, Terry Austin.

Agenda Topics

Introductions

Introductions by all attendees were made.

Approval of the November 18, 2005 Minutes

Minutes were provided prior to the meeting electronically and hard copies provided at the meeting. A motion to accept the minutes as presented was made by Bob Knox and seconded by Robin Davis. The minutes were accepted by unanimous vote.

Chair Report

The Chair attended the recent VAGEMSA meeting and there were two items of legislation that were discussed. The first was "sharing of information"; the current wording of a piece of legislation allowed the sharing of patient information for performance improvement allows any circuit court to rule the information discoverable. The question was raised at the VAGEMSA meeting that if one circuit court allowed the release of information it would set precedence statewide.

The second item discussed was a bill being presented that would make EMS providers mandated reporters of child abuse. The question was posed whether there was actually a significant problem "out there" with EMS not being mandated reporters.

Another concern was that the bill could lead to parents avoiding activating 9-1-1 knowing that EMS was mandated to report child abuse. The chair emphasized that this committee was concerned with the issues of child abuse, however they wanted to assure that the bill not have negative effects to the delivery of EMS.

OEMS Report

OEMS staff updated the Committee that the VDH organizational structure had been evaluated and that the Office of EMS was moved as a whole from reporting to the Deputy Commissioner of Public Health to the Deputy Commissioner of Emergency Preparedness and Response effective January 3rd. No immediate service delivery issues are expected.

Also passed on was a brief explanation of some internal organizational changes at OEMS.

A reminder that the 2006 Legislative Session began this week and that at present there were no bills affecting the Medevac Community above the Chairs' report.

There are two new Virginia licensed EMS agencies providing air medical services since the last meeting. Both are based out of state and they are Wings Air Rescue from Johnson City, TN and Air Evac out of Middleboro, KY. In addition the Virginia Beach Police (VBPD) are in the process of establishing air medical services for their EMS System. VBPD have contacted OEMS gathering information to develop this program and are attending this Medevac Committee Meeting.

Draft Regulations

There was an opportunity prior to this meeting for commenting on the final draft of Air Medical Regulations. The Chair requested to entertain a motion to approve the Air Medical Regulations as presented electronically.

in advance and in hard copy form at this meeting. A **motion** was made by Kathy Colantuono and **seconded** by Brian Solada to adopt and accept the draft Air Medical Regulations.

Discussion; Paul Davenport commented that the regulations provide a good base, but there is still a feeling in this group that there are still some key issues that still need to be addressed and that there is a need to continue addressing issues on an ongoing basis. This discussion was not offered as an opposition to the motion.

A **vote** on the motion was called and the Committee voted unanimously to accept the motion and approve the Air Medical Regulations.

After the vote, there was lengthy discussion that during the February 2005 meeting there was a motion passed stating there would be a moratorium placed on establishing new or expanding current Medevac services in Virginia and that the committee would develop a Certificate of Need (CON) process along with the regulations adopted today.

The Committee requested to have it noted on public record that they were willing and attempted to address a CON process and that OEMS informed the Committee that they were instructed by their administrative leadership that developing a CON was not an option and any objectives being addressed by a CON should be addressed through regulations. The Committee feels as if this objective was not met by the regulations developed.

There was discussion on the November 18, 2005 motion that stated OEMS was to re-address the matter of a CON with VDH Executive Management should there be a change of administration. With the change of Deputy Health Commissioners that OEMS reports to, the Committee requests OEMS present the CON to the new Deputy Commissioner as well as a representative from the Attorney General's (AG) Office.

Upon presenting the desire of the Medevac Committee to institute a CON for Medevac services in Virginia the Committee Request a determination of whether a CON could legally be put into place and if not, then they seek guidance on other ways to achieve a CON like process.

It was requested that the Deputy Commissioner and/or a representative from the AG's Office be present at the April 2006 meeting to discuss this issue. OEMS agreed to pass this request on to both parties.

It was also requested that the Committee be allowed to provide a presentation educating the Deputy Commissioner and/or AG on the need of the system for a CON process.

Best Practices

Robin, Kathy, Terry and Paul D. met as a sub committee to begin forming a Best Practices Document for Medevac Services operating in Virginia. During the meeting, last evening, they came up with two questions. The first question was that the pre hospital community was said to be confused about air medical service, what are the issues that confuse the ground EMS crews and secondly why can't we enter in to a CON process if the committee has decided to move forward with a CON?

There was discussion related to the first question about ground crew and two general areas were identified, medical necessity and "fly overs".

The second question about why this Committee could not enter in to a CON process even though the committee decided to, but have been told they cannot.

OEMS reminded the Committee that during the November 2005 meeting a motion was made to re-address the CON Process should there be a new Administration with the Health Department. The Committee requested OEMS present the desire of the Committee to have a CON process for Medevac to the new Deputy Commissioner and also to the Attorney General's Office.

Kathy Colantuono would also like to see it clearly stated that this committee was willing and attempted to provide a CON process. Kathy requests that the committee be allowed to perform a presentation for the AG/Deputy if they were to attend. Lt. Saunders states, how can the Health Department have a CON process for hospitals, but we are not allowed to with Medevac Services

Dave Trueman states he didn't believe the Committee was challenged with restricting growth, but to expand our regulations, so we maintain good practices. Believes the Best Practices Committee should not be addressing CON, but truly best practices, such as PI etc.

Paul D. states the Committee was looking for direction on what exactly they should be working on through the Best Practices Committee. Terry, best practices can be different things to different people. Continued discussion on looking for direction on what the Best Practices group should be working on.

The Chair believes the Best Practices plan began during the Virginia Beach conference and they were supposed to be business ethics that were left to be addressed but not regulated. They would be items that

provide guidance on the best way to operate a Medevac service. The Chair feels if we legislate every aspect of air medical services that it would restrict our ability to perform.

Lt. Saunders brings up the issue that if there was a central dispatch, that this would alleviate the confusion for field providers about who to call. Lt. Saunders states we should start bringing these issues up now and begin working on them and that they should be a part of our Best Practices work.

Kathy Colantuano brings up training and a need to share some training efforts such as air medical service CISM, crew resource management and others.

The Chair and OEMS staff educated the Committee that task forces and work groups can be supported and the committee should decide which areas they would like to work on.

Long discussion on how this committee will proceed to address issues of all varieties.

Bob Knox appreciates that we will invite AG and Deputy Commissioner, but if we can get an answer on the ability to place a CON, prior to the next meeting, that may change what we need to look at. Continued discussion that we will attempt to educate the AG/Deputy so they can come to the April meeting with the ability to direct the committee on CON.

The Best Practices Committee Members are offering to meet monthly. They would like to get input from the Committee on what items members would like to see addressed through the Best Practices Document.

They will use the Medevac List Serve to receive input from the Committee and return to the April Meeting with a plan.

Some potential items for the Best Practices Document include:

Flight following

State level training

PIAP

Central Dispatch

Trauma Triage

Regional Dispatch

The Best Practices Committee will meet in on February 9th and will decide then if a March meeting is needed. All are welcome.

Program Announcements

LifeEvac; no report, Pegasus; no report, lifeguard; Carl has been passing on crane info due to construction the cranes are not tall, but they are unlit. Nightingale; no report. Med flight II; there are new cranes in their area and announcements will be made soon. Don Childs states there is a steel structure and cranes in the area of Lynchburg General Hospital. TNACT class being hosted by Lynchburg (check the web site).

Purvis; Fairfax is working with the state to takedown a present tower and put up two new ones. Lt. Saunders discussed VDOT making cell towers that are on state property being mandated to have warning lights.

New Business

None

Old Business

None

Scheduled Meetings

2006 Quarterly Meetings: April 13, July 13 and October 12, 2006.

Meetings will be held at "The Place"